

**TESTIMONY OF
SAINT FRANCIS HOSPITAL and MEDICAL CENTER
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Friday, March 15, 2013**

SB 968, An Act Concerning Reports of Nurse Staffing Levels

The Saint Francis Hospital and Medical Center appreciates the opportunity to submit testimony concerning **SB 968, An Act Concerning Reports of Nurse Staffing Levels**.

This bill would require hospitals to submit to the Department of Public Health annual reports on prospective nurse staffing plans and quarterly reports of actual daily nurse staffing levels by numerical staff-to-patient ratios for registered nurses, licensed practical nurses, and registered nurses' aides as defined in Section 20-102aa of the Connecticut General Statutes.

Saint Francis opposes SB 968 because this requirement would not assist the hospital in its efforts to provide safe, high quality, timely delivery of health care services and would impose an unnecessary administrative burden on the institution.

Connecticut hospitals are committed to providing the highest quality care to achieve optimal patient outcomes. They are intensely engaged in building and sustaining organizational cultures of safety and employing high reliability strategies and evidence-based practices to prevent patient care complications and ensure the best patient experience. The reporting that would be mandated by SB 968, which focuses on a gross numeric staff-to-patient ratio, does not reflect the complexity and dynamic nature of hospital staffing, and would provide no insight or benchmark for improvements. The simple counting approach required by this bill represents a measure that is unrelated to any patient care goal.

Nursing professionals at Connecticut hospitals continuously assess patient care needs and consider a wide range of factors that go beyond numbers and ratios to make staffing decisions. Some of the patient specific factors measured by nurses include urgency of a patient's condition, age, cognitive and functional ability, scheduled procedures, and stage of recovery. Staff-specific factors such as licensure, educational preparation, skill level, years of experience, tenure on the patient unit, and level of experience with a particular type of patient care are also considered. These elements are not captured by simply counting the total number of patients and the total number of staff at any level which is the focus of SB 968.

To accommodate changes in census, acuity, and the specific care needs of patients, hospital staffing levels and skill mix are constantly adjusted throughout the day. Quarterly reporting of numbers and ratios, again, cannot provide an accurate reflection of actual staffing levels. In addition, and most important, numbers alone are not reliable indicators of quality, and there is no scientific evidence to support a specific optimum nurse-to-patient ratio for acute care hospitals.

Saint Francis believes that SB 968 does not in any way support or enhance meaningful patient care quality goals and that the public is better served through initiatives directed toward achieving positive patient outcomes. We urge this Committee to support initiatives that meaningfully contribute to adequate resources for the provision of quality care, rather than impose an unnecessary administrative burden on hospitals that will only draw upon the precious time of staff members who would better serve our healthcare mission by remaining focused on patient care.

Saint Francis urges you not to support SB 968. Thank you for consideration of Saint Francis Hospital and Medical Center's position on this bill.